# NPDES Facility Compliance Evaluation Inspection Checklist for Class I Semi-Publics Revised 9-6-07 NPDES Permit #: Facility Name: Month/Day/Year:

All evaluations indicated on this form are based upon the Inspector's observations at the time of the inspection.

## A. Receiving Waters Appearance

					1. The	receiving stream is visibly:
Yes	s N	lo	N/E	N/A	a.	Free of excessive deposits of settled solids.
Yes	s N	lo	N/E	N/A		Free of excessive floating debris, oil, scum, or foam.

## B. Effluent Appearance

				1. At the	time of the inspection, effluent is essentially:
Yes	No	N/E	N/A	a.	Free of excessive solids.
Yes	No	N/E	N/A	b.	Free of excessive floating debris, oil, scum, or foam.

#### C. Permit

Yes	No	N/E	N/A	1.	Expired Permit has been administratively extended.
Yes	No	N/E	N/A	2.	The permit has been properly transferred.
Yes	No	N/E	N/A	3.	Receiving waters are accurately described in permit.

#### D. SSO (Sewer Overflow)

Vec	λT	N/E	* T / A	1	Facility has met SSO reporting requirements.	( , 11 0)
res	No	IN/P.	1N/ A	- 1	Facility has met SSO reporting requirements	(see table page 3)
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# E. Facility/Site

Yes	No	N/E	N/A	1.	Facility has standby power or equivalent provision.
Yes	No	N/E	N/A	2.	An adequate alarm or notification system for power or equipment failure is available.
Yes	No	N/E	N/A	3.	Facility grounds are maintained in a manner which allows adequate access and/or view of all units.

## F. Operation

				1. All facilities and systems necessary for achieving compliance with the terms and conditions of the
				permit are operated in a manner consistent with the following:
Yes	No	N/E	N/A	a. All facilities and systems are operated efficiently.
Yes	No	N/E	N/A	b. An adequate, qualified operating staff is provided to carry out the operation of the facility.
Yes	No	N/E	N/A	2. Sufficient sludge is wasted from treatment system at proper time intervals to maintain process efficiency.

## G. Maintenance

Yes	No	N/E	N/A	1.	All facilities and systems are adequately maintained.
Yes	No	N/E	N/A	2.	Lift station inspections are adequate.
Yes	No	N/E	N/A	3.	Lift station cleaning and maintenance procedures are adequate.
Yes	No	N/E	N/A	4.	Collection system maintenance is adequate.

## H. Sludge Disposal

Voc. No. N/E N/A 1 Cludes consering 11 11 1 1 1 C					
The string is the live in the	Yes	No	N/E	N/A	1. Sludges, screenings, and slurries are properly handled and disposed of.

# I. Self-Monitoring Program

Yes	No	N/E	N/A	1.	Samples are taken at pre-designated locations.
Yes	No	N/E	N/A	2.	Samples are representative.
Yes	No	N/E	N/A	3.	Facility conducts sampling and analyses on parameters and wastestreams specified in the permit.
Yes	No	N/E	N/A	4.	Facility conducts sampling and analyses of types and at frequencies specified in the permit.
				5.	Sample collection procedures include:
Yes	No	N/E	N/A		a. Samples are refrigerated during compositing.
Yes	No	N/E	N/A		b. Proper preservation techniques are used.
Yes	No	N/E	N/A		c. Containers and holding times conform to 40 CFR 136.3.
				6.	Sampling and analysis data include:
Yes	No	N/E	N/A		a. Dates, times, and location of sampling.
Yes	No	N/E	N/A		b. Name of individual performing sampling.
Yes	No	N/E	N/A		c. Adequate on site testing data and bench sheets

## J. Flow Measurement

Yes	No	N/E	N/A	1.	Flow is properly monitored as required by the permit.
Yes	No	N/E	N/A	2.	Calibration records are available for review.
Yes	No	N/E	N/A	3.	Effluent flow is used in calculating effluent loadings.

# K. Laboratory

Yes	No	N/E	N/A	1.	Approved analytical methods used as required by permit.
Yes	No	N/E	N/A	2.	Calibration and maintenance of instruments and equipment is satisfactory.
Yes	No	N/E	N/A	3.	QA and QC procedures are adequate.
				4.	Commercial Laboratory Used:
					Laboratory Name:Laboratory Address:
					Laboratory Contact:
					Laboratory Phone:
Yes	No	N/E	N/A		Chain-of-Custody procedures followed.

# L. Records/Reports

Yes	No	N/E	N/A	1. Records and reports are maintained and available as required by permit.	
Yes	No	N/E	N/A	2. Information is maintained for 3 years.	
				3. DMRs and MROs are completed properly and accurately.	
Yes	No	N/E	N/A	a. "No Ex" column is accurate.	
Yes	No	N/E	N/A	b. Signatory requirements are met.	
Yes	No	N/E	N/A	c. Reports are prepared by or under the direction of a certified operator.	
Yes	No	N/E	N/A		

# M. Compliance Schedules

Yes	No	N/E	N/A	1.	Monitoring milestones in the Schedule of Compliance have been met.
Yes	No	N/E	N/A	2.	Reporting milestones in the Schedule of Compliance have been met.

## N. Pretreatment

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I Vac	Nia	NI/I-i	NI/A	1 1	The facility operates without significant interference from industrial or commercial discharges.
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				1	

# O. Summary of Monitoring Records Review

MO/YR	Effluent Limit	Number of		Number of
WO/YR	Violations	Parameter Violations	Location of SSO	Overflows
/	Yes No			
/	Yes No			
/	Yes No			
/	Yes No			
//	Yes No			
/	Yes No			
/	Yes No			
	Yes No			
	Yes No			
/	Yes No			
/	Yes No			
/	Yes No			
/	Yes No			
/	Yes No			
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Comments Regarding Evaluations						
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